

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)Applicant(s): **A. John Speranza, et al.**

Docket No.

PES-0042

Serial No.

09/909,845

Filing Date

July 20, 2001

Examiner

B. Sines

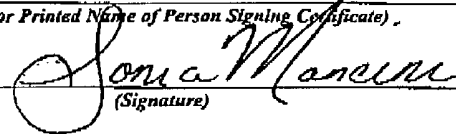
Group Art Unit

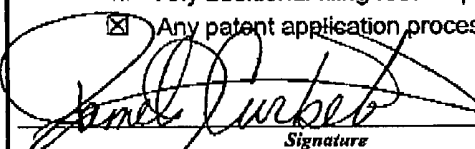

1743Invention: **ELECTROCHEMICAL CELL SYSTEM OUTPUT CONTROL METHOD AND APPARATUS****OFFICIAL****RECEIVED
CENTRAL FAX CENTER****JUL 12 2004**I hereby certify that this **Amendment Transmittal (1 pg) & Amendment (14 pgs)**
(Identify type of correspondence)is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. **(703) 872-9306**)on **July 12, 2004**

(Date)

Sonia Mancini

(Typed or Printed Name of Person Signing Certificate)


(Signature)**Note: Each paper must have its own certificate of mailing.**

AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. PES-0042	
Applicant(s): A. John Speranza, et al.					
Serial No. 09/909,845	Filing Date July 20, 2001	Examiner B. Sines	Group Art Unit 1743		
Invention: ELECTROCHEMICAL CELL SYSTEM OUTPUT CONTROL METHOD AND APPARATUS					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.					
<input type="checkbox"/> A verified statement to establish Small Entity status under 37 CFR 1.27 is enclosed.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	28 -	42 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	9 -	7 =	2 x	\$43.00	\$86.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$86.00
<input type="checkbox"/> No additional fee is required for amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. 06-1130 in the amount of \$86.00					
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 06-1130					
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: July 12, 2004		
Pamela J. Curbelo Registration No. 34,676 Customer No. 23462 (860) 286-2929			I certify that this document and fee is being deposited on July 12, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		
cc:			 Signature of Person Mailing Correspondence		
			Sonia Mancini VIA FACSIMILE		
			Typed or Printed Name of Person Mailing Correspondence		

P11SMALL/REV06